

BEST AVAILABLE

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEE DETERMINATION   | bf       | 70385  |         |
| O.I.P.E. CLASSIFIER |          | 31     | 6/24/94 |
| FORMALITY REVIEW    |          | 69853  | 6/26/98 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | 1     | ✓        | 10/04/90 |
| 2     | 2     | ✓        | 12/02/91 |
| 3     | 3     | ✓        | 11/11/91 |
| 4     | 4     | ✓        | 11/11/91 |
| 5     | 5     | ✓        | 11/11/91 |
| 6     | 6     | ✓        | 11/11/91 |
| 7     | 7     | ✓        | 11/11/91 |
| 8     | 8     | ✓        | 11/11/91 |
| 9     | 9     | ✓        | 11/11/91 |
| 10    | 10    | ✓        | 11/11/91 |
| 11    | 11    | ✓        | 11/11/91 |
| 12    | 12    | ✓        | 11/11/91 |
| 13    | 13    | ✓        | 11/11/91 |
| 14    | 14    | ✓        | 11/11/91 |
| 15    | 15    | ✓        | 11/11/91 |
| 16    | 16    | ✓        | 11/11/91 |
| 17    | 17    | ✓        | 11/11/91 |
| 18    | 18    | ✓        | 11/11/91 |
| 19    | 19    | ✓        | 11/11/91 |
| 20    | 20    | ✓        | 11/11/91 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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